

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000001	2 PAGE # 1 of 8
3 COMMITTEE NAME Citizens Against Rail Taxes		OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address 10001 Jupiter Hills Drive Austin, TX 78747		Date Received	
5 CAMPAIGN TREASURER NAME MS / MRS / MR Mr. FIRST James B. MI NICKNAME LAST Skaggs SUFFIX		Receipt #	Amount
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business) 4700 Toreador Drive Austin, TX 78746		Date Processed	
7 CAMPAIGN TREASURER'S MAILING ADDRESS <input type="checkbox"/> Change of Address 4700 Toreador Drive Austin, TX 78746		Date Imaged	
8 CAMPAIGN TREASURER PHONE (512) 413-8255			
9 REPORT TYPE <input type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination			
10 PERIOD COVERED Month Day Year 08/11/2014 THROUGH 09/25/2014			
11 ELECTION ELECTION DATE Month Day Year 11/04/2014 ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special			
GO TO PAGE 2			

**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE & TOTALS**

**FORM SPAC
COVER SHEET PG 2**

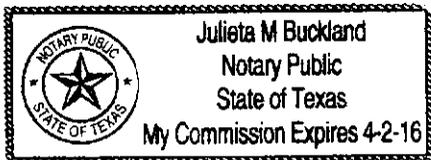
12 COMMITTEE NAME Citizens Against Rail Taxes **ACCOUNT #** (Ethics Commission filers)
00000001

13 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input type="checkbox"/> SUPPORT (Candidate or Measure) <input checked="" type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder only)	<input type="checkbox"/> CANDIDATE	CANDIDATE / OFFICEHOLDER NAME				
	<input type="checkbox"/> OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)				
		<table style="width: 100%;"> <tr> <td style="width: 60%;">BALLOT IDENTIFICATION / #</td> <td style="width: 40%;">ELECTION DATE</td> </tr> <tr> <td>Unknown</td> <td>Month Day Year 11/04/2014</td> </tr> </table>	BALLOT IDENTIFICATION / #	ELECTION DATE	Unknown	Month Day Year 11/04/2014
BALLOT IDENTIFICATION / #	ELECTION DATE					
Unknown	Month Day Year 11/04/2014					
		<input checked="" type="checkbox"/> MEASURE DESCRIPTION Urban Rail Referendum				

14 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 130.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 278,830.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 462.24
	4. TOTAL POLITICAL EXPENDITURES	\$ 12,830.75
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 265,999.25
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

15 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



AFFIX NOTARY STAMP / SEAL ABOVE

James B. Skaggs
Signature of Campaign Treasurer

Sworn to and subscribed before me, by the said James B Skaggs, this the 14 day of January, 2015, to certify which, witness my hand and seal of office.

Julieta M Buckland *Julieta M Buckland* *Notary*
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/4 Report: 3/8	
2 FILER NAME Citizens Against Rail Taxes		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/11/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) 4000 N. Big Spring, LTD. 6 Contributor address; City; State; Zip Code 510 S Congress Ave Ste 400 Austin, TX 78704-1740	7 Amount of contribution (\$) \$2,500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Borgeit, Roger Contributor address; City; State; Zip Code 106 Laurel Ln Austin, TX 78705-2814	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 09/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burrow, Janis S. Contributor address; City; State; Zip Code 1717 W 6th St Ste 390 Austin, TX 78703-4792	Amount of contribution (\$) \$75,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 08/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daugherty, C. Contributor address; City; State; Zip Code 1403 Club Ridge Cv Austin, TX 78735-1623	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 09/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daugherty, C. Contributor address; City; State; Zip Code 1403 Club Ridge Cv Austin, TX 78735-1623	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/4 Report: 4/8	
2 FILER NAME Citizens Against Rail Taxes		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 08/18/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eckert, William C. 6 Contributor address; City; State; Zip Code 1821 Enfield Rd Apt D Austin, TX 78703-3460	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hartman, David A. (Mr. and Mrs.) Contributor address; City; State; Zip Code 3345 Bee Caves Rd Ste 203 Austin, TX 78746-8692	Amount of contribution (\$) \$25,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 08/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hartman, Douglas (Mr. and Mrs.) Contributor address; City; State; Zip Code 3345 Bee Cave Rd Ste 203 Austin, TX 78746-8692	Amount of contribution (\$) \$25,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, DH Contributor address; City; State; Zip Code 116 Bimam Wood Ct Austin, TX 78746-4500	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lewis, John C. Contributor address; City; State; Zip Code 3839 Bee Caves Rd Ste 204 West Lake Hills, TX 78746-5318	Amount of contribution (\$) \$20,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The instruction Guide explains how to complete this form.		1 PAGE # Schedule: 3/4 Report: 5/8	
2 FILER NAME Citizens Against Rail Taxes		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 08/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LOC, Ltd. 6 Contributor address; City; State; Zip Code 1717 W 6th St Ste 390 Austin, TX 78703-4792	7 Amount of contribution (\$) \$35,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 08/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maier, Richard Contributor address; City; State; Zip Code 704 E 45th 1/2 St Austin, TX 78751-4025	Amount of contribution (\$) \$10,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ring, Harvey (Mr. and Mrs.) Contributor address; City; State; Zip Code 66 Pascal Ln Austin, TX 78746-2551	Amount of contribution (\$) \$25,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 08/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Skaggs, James B. (Mr.) Contributor address; City; State; Zip Code 4700 Toreador Dr Austin, TX 78746-2411	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Skaggs, James B. (Mr.) Contributor address; City; State; Zip Code 4700 Toreador Dr Austin, TX 78746-2411	Amount of contribution (\$) \$15,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/4 Report: 6/8	
2 FILER NAME Citizens Against Rail Taxes		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Skaggs, James B. (Mr.) 6 Contributor address; City; State; Zip Code 4700 Toreador Dr Austin, TX 78746-2411	7 Amount of contribution (\$) \$30,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Marvin Contributor address; City; State; Zip Code 5503 Caprice Dr Austin, TX 78731-4833	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walters, William S. III Contributor address; City; State; Zip Code 1010 W Martin Luther King Jr Blvd Austin, TX 78701-1070	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weip, Mark T. (Mr. and Mrs.) Contributor address; City; State; Zip Code 7108 Barefoot Cv Austin, TX 78870-1524	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/2 Report: 7/8		2 FILER NAME Citizens Against Rail Taxes		3 ACCOUNT # (TEC filers) 00000001	
4 Date 08/29/2014		5 Payee name Ampro Productions			
6 Amount (\$) \$584.55		7 Payee address City: State: Zip Code 7202 Smokey Hill Rd Austin, TX 78736-3029			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing Services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/29/2014		Payee name Ampro Productions			
Amount (\$) \$7,233.27		Payee address City: State: Zip Code 7202 Smokey Hill Rd Austin, TX 78736-3029			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing Services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/11/2014		Payee name Home Depot			
Amount (\$) \$837.86		Payee address City: State: Zip Code 2551 S IH35 Round Rock, TX 78664-7314			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Sign Supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/02/2014		Payee name Lupe Tortilla			
Amount (\$) \$205.15		Payee address City: State: Zip Code 701 S Cpital of Texas Hwy West Lake Hills, TX 78746-5243			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CART Campaign Business Meeting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/2 Report: 8/8		2 FILER NAME Citizens Against Rail Taxes		3 ACCOUNT # (TEC filers) 00000001	
4 Date 09/22/2014	5 Payee name Pillmore, Kathy				
6 Amount (\$) \$2,000.00	7 Payee address City; State; Zip Code 10001 Jupiter Hills Dr Austin, TX 78747-1312				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Compensation for CART Campaign Work		
			<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 09/12/2014	Payee name Sam's Club				
Amount (\$) \$172.68	Payee address City; State; Zip Code 4970 W Highway 290 Austin, TX 78735-6748				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Furniture/Table Purchase		
			<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 09/15/2014	Payee name Vera, Bobby				
Amount (\$) \$675.00	Payee address City; State; Zip Code 818 Craters of the Moon Blvd Pflugerville, TX 78660-5601				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Sign Installation		
			<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 09/20/2014	Payee name Vera, Bobby				
Amount (\$) \$660.00	Payee address City; State; Zip Code 818 Craters of the Moon Blvd Pflugerville, TX 78660-5601				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Sign Installation		
			<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	